

10/530155 #4

# Supplemental Application Data Sheet

## APPLICATION INFORMATION

Application Number:: 10/530,155

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks:

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?::

Number of Copies of CRF::

Title:: METHOD AND APPARATUS FOR ASSESSING  
PSYCHIATRIC OR PHYSICAL DISORDERS

Attorney Docket Number:: 235036

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 10

Small Entity?:: No Yes

Latin Name::

Variety denomination name::

Petition Included?::

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

## APPLICANT INFORMATION

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: ~~Australia~~ Germany  
Status:: Full Capacity  
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State or Prov. of Residence::  
Country of Residence:: Oman  
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City of mailing address:: Sohar  
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Country of mailing address:: Oman  
Postal or Zip Code of mailing address:: 311

Inventor Authority Type:: Inventor  
Primary Citizenship Country:: Australia  
Status:: Full Capacity  
Given Name:: Peter  
Family Name:: YELLOWLEES  
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2450 48<sup>th</sup> Street  
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State or Province of mailing address:: CA  
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## **REPRESENTATIVE INFORMATION**

Representative Customer Number:: 23460

Representative Designation::                      Registration Number::                      Representative Name::

## **DOMESTIC PRIORITY INFORMATION**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/AU2003/001307	10/03/03

## **FOREIGN APPLICATION INFORMATION**

Country::	Application Number::	Filing Date::	Priority Claimed
AU	2002951811	10/03/02	Yes
AU	2003901081	03/10/03	Yes

## ASSIGNEE INFORMATION

Assignee name:: The University of Queensland  
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